

BROUGHTON HOSPITAL
MORGANTON, NORTH CAROLINA

**CLINICAL PSYCHOLOGY
DOCTORAL
INTERNSHIP**



Vivian Streater
CEO

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Chief Medical Officer

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North Carolina Department of Health and Human Services
Division of State Operated Healthcare Facilities

OVERVIEW

Broughton Hospital offers an APA-accredited internship program for persons desiring extensive experience with mentally ill adults and adolescents. The program is accredited by the American Psychological Association's Commission on Accreditation and has been accredited since 1980. Broughton Hospital is a progressive state-operated psychiatric hospital serving the 37 western counties of North Carolina. The catchment area is primarily rural but does encompass the urban areas of Charlotte and Asheville and includes persons with diverse cultural/ethnic backgrounds (e.g., Appalachian, Cherokee, Latino, and Hmong). The program's focus is on acquiring experience within an inpatient psychiatric setting. Interns have the opportunity to gain inpatient experience with an SPMI population, with possible specialty areas of focus in distinct service areas of the hospital: an adult admissions service, an adult extended treatment service, an adolescent inpatient service, a geriatric service, and a 14 bed deaf unit. The internship program begins on July 1st and ends on the following June 30th. Interns receive a stipend of \$20,792.

APPLICATION PROCEDURE

Applicants to the Broughton internship program must complete the AAPI online application. The AAPI online application can be accessed through the Applicant Portal at: appic.org.

Those applicants who are matched with the Broughton program will also be expected to complete a State of North Carolina Application for Employment form after Match Day. *Appointments to internship positions at Broughton are contingent upon the successful results of drug testing and criminal background checks prior to the beginning of the internship year.*

The Broughton program operates in accordance with the current APPIC Match Policies. This internship site abides by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant. The Broughton program is a participant in the APPIC Internship Matching Program. Broughton's APPIC Member Number is 1415. Applicants must obtain an Applicant Agreement package from National Matching Services, Inc. and register for the Matching Program in order to be eligible to match to the Broughton program. Broughton Hospital's Program Code Number for the Match is **141511**.

The deadline for application to the Broughton internship program is November 15th (all materials must be received on site by November 15th). Applicants will be contacted on or before December 15th by phone or email regarding their application status and whether they will be invited for an interview. To receive a more comprehensive depiction of Broughton and the internship program, in-person interviews are encouraged but not required. Because of the limited number of in-person interviews we are able to accommodate, phone interviews may also be offered for applicants who are still under consideration. Applicants who are not able to come for an in-person interview may make arrangements for a telephone interview.

The Broughton faculty welcomes candidates with diverse backgrounds, and minorities are strongly encouraged to apply. Competitive applicants for the Broughton program will have completed and/or demonstrated the following:

- a broad variety of clinical/practicum experiences (minimum 600 hours direct, 400 hours indirect)
- interest and/or experience working with the severely and persistently mentally ill
- interest and/or experience in rural and public sector mental health
- assessment skills in the most commonly used diagnostic instruments (e.g., PAI, MMPI-2) as well as projectives, including Rorschach (Exner scoring)
- at least five integrated assessment batteries

Written inquiries may be forwarded to:

James M. Moore, Jr., Ph.D.
Psychology Internship Training Director
Broughton Hospital
1000 South Sterling Street
Morganton, North Carolina 28655

Email: jim.moore@dhhs.nc.gov

Phone: (828) 438-6385

MISSION AND VALUES

The mission of the Broughton Hospital internship program is to train competent and ethical psychologists who can work with a wide range of psychopathology and diverse patients. The program promotes professional development through supervised clinical experience and didactics in a supportive and nurturing environment.

TRAINING MODEL

The Broughton internship program trains interns to provide a broad array of psychological services within the public mental health sector. The program is based on a practitioner-scholar model. This model promotes the development of clinical skills in assessment and treatment as well as professional development; and interns will be able to develop skills with specific clinical populations found within the hospital's patient populations. These populations include but are not limited to: the severely and persistently mentally ill inpatient population, adult acute psychiatric inpatients, geropsychiatric and medical-psychiatric patients, adolescent inpatients, and deaf psychiatric inpatients. The program also provides training in working with interdisciplinary treatment teams and trains interns to work as a unit psychologist in a hospital setting.

The training year emphasizes the continuing development of each intern's assessment and treatment skills, which enables interns to transition into their future role as independent practitioners and as psychologists in an interdisciplinary setting. Also emphasized is the professional growth and development of interns in their transition from graduate students to entry-level professionals. Training is accomplished using both didactic and experiential modalities. Each intern is expected to demonstrate achievement of certain core competencies by the year's end, such as being able to conceptualize and implement appropriate psychotherapy treatment, and to generate assessment conclusions and recommendations consistent with psychological test data. The intern's clinical experiences are integrated with scholarly review of sound clinical research with an emphasis on the development of a best practices approach to providing care. The Broughton program fosters an awareness of ethical, systems, and multicultural issues and a humanitarian understanding of the critical importance of continuity of care in the treatment of the emotionally distressed and mentally ill.

GOALS AND OBJECTIVES

Program Goals:

1) Proficiency in Psychological Treatment Skills

A primary objective of the program is to train interns in conceptualizing cases, planning treatment, and implementing psychotherapeutic interventions with adults and adolescents, many of whom present with severe psychopathology. The emphasis is on individual and group psychotherapy but may include some family therapy. Treatment plans should take a range of factors into consideration, including the severity of psychopathology, managed care issues, practice standards and empirically supported therapy guidelines as well as patient characteristics of race, ethnicity, culture, gender, socioeconomic status, and lifestyle.

A further objective is to train interns to provide treatment to a range of patient populations as seen in the public sector in a manner consistent with the mission and values of the training site. The internship provides some opportunity for longer-term therapy, but the intern will primarily be expected to develop skills in brief psychotherapy.

2) Proficiency in Assessment Skills

Interns are exposed to a broad range of assessment approaches with which they would be expected to be familiar as an entry-level psychologist. Approaches include intellectual, personality (objective and projective), neuropsychological, and adaptive assessment as well as the principles of risk assessment and risk management for suicide and violence potential. Interns also receive training on assessment of competency and substance use assessment.

Weekly seminars are offered in these areas of assessment in addition to the experiential offerings within rotations. Interns gain experience in using standardized administration of psychological assessment instruments, and in utilizing their assessment skills to formulate appropriate diagnostic conclusions and treatment recommendations. This involves scoring, interpreting and integrating test/interview data to answer referral questions. Training methodologies include individualized supervised experience, and faculty and interns presenting assessment seminars and case presentations which facilitate hypothesis generation. Interns are also supervised to recognize multicultural factors in assessment in addition to the limitations of psychological assessment instruments.

3) Development as a Professional Psychologist

The training program stresses interns' abilities to understand, practice, and problem-solve within the ethical principles and standards of the profession of psychology and to show sensitivity to individual and cultural diversity. A further objective is to train interns to function effectively in an interdisciplinary setting as a unit psychologist and to have a working knowledge of various systems-level issues that can impact upon service provision.

Other aspects of professional development that are a focus of supervision and training include utilizing professional communication skills (e.g., through case presentations), consultation, program planning,

providing clinical supervision when available, and knowledge of professional, ethical, and legal issues associated with clinical practice.

RESOURCES

To facilitate accomplishment of the above goals and objectives, there are approximately twelve doctoral-level psychologists associated with the Broughton internship program. Brief statements about staff appear at the end of this booklet.

THE HOSPITAL

Broughton Hospital is one of three regional psychiatric facilities operated by North Carolina's Division of State Operated Healthcare Facilities. Broughton Hospital serves the 37 westernmost counties of North Carolina and is comprised of four specialty areas, which provide various treatment services. The hospital consists of two service areas, adult services and specialty services, but each of these has two or more components.

Adult services has an acute component in which the average length of stay is typically brief, and an extended treatment component serving longer term, SPMI adults. Specialty services has separate units for adolescents, deaf persons, geriatric patients, and a unit for persons who have acute or chronic medical needs that cannot be met on their home unit.

Within each service, therapeutic services are coordinated by interdisciplinary treatment teams. In addition to the comprehensive array of physical diagnostic and treatment approaches, individual, group, behavior, family, and milieu therapy are available on each service. Occupational, work, recreation, and creative arts therapies are also available, and vocational rehabilitation provides assessment and training in a nearby facility.

Over the past decades, the hospital's mean daily census has decreased from 2300 to less than 300 patients. The hospital currently admits more than 1000 patients a year.

Broughton Hospital also serves as a regional educational facility. Professional training is provided to interns in clinical psychology, as well as to students in occupational therapy, pharmacy, medicine, dentistry, and nursing. The holdings of the Staff Library are supplemented by inter-library loan capability. Computer searches of the medical and psychological literature are also available via databases that are accessed through the North Carolina Live online library network and the Wake Forest University Medical School's Carpenter Library.

PRIMARY ROTATIONS

Within the hospital, interns complete three four-month primary rotations. Typically, these rotations occur on the adult admissions service, the adult extended treatment service, adolescent services, and the geropsychiatry units. A rotation or other clinical experience may also occur on the deaf unit. All of these

rotations and placements depend on supervisor availability, the need for psychological services, and most importantly, the training needs and/or interests of the interns. All hospital rotations are four months in duration. The interns will also have a secondary rotation of approximately eight hours per week. Secondary rotations may be in another service area or in the Dialectical Behavior Therapy program or the Capacity Restoration program. The following describes the various rotations and services at Broughton Hospital.

Adult Admissions



The adult admissions component of the adult service is an exciting experience in the operation of a continuous care system. The patient population is diverse and presents with a wide variety of disorders. The service has 95 operating beds distributed over five units. The service is rapid-paced and many patients have a length of stay of less than one month. During the rotation, interns are involved primarily with patients in a relatively acute psychiatric status for whom intensive, multimodal, crisis intervention methods are mobilized in an effort to stabilize patients and prepare them for continuing care either in the community or in a longer-term stay service.

The adult extended treatment program is an 88-bed residential treatment service for the chronically mentally ill population and consists of five units separated according to clinical acuity and gender. The service receives almost all of its adult patients from adult The adult admissions rotation is assessment intensive. Interns can receive referrals for psychological assessment from any of the five treatment teams. These referrals are coordinated by the intern's supervisor. Interns are trained in diagnostic interviewing, substance abuse assessment, and interpretation of formal assessment data (e.g., PAI, MMPI-2, Rorschach, TAT) to provide specific diagnostic formulations and treatment recommendations. They are also encouraged to work closely with the patient's treatment team to achieve maximum continuity of care and consistency of treatment approach.

Psychotherapy on the adult rotation emphasizes brief, focused approaches targeting more effective coping strategies and facilitating management of affect, ideation, and behavior. In addition to individual therapy and psychological assessment, interns typically serve as facilitators or co-facilitators in at least two groups with a supervising psychologist on the service's treatment mall. Further duties may include

behavioral consultation for dangerous or disruptive behaviors, treatment team consultation, and family therapy.

Adult Extended Treatment Service

The adult extended treatment program is an 88 –bed residential treatment service for the chronically mentally ill population and consists of five units separated according to clinical acuity and gender. The service receives almost all of its adult patients from adult admissions. Many of the patients have been unable to stay in the community without repeated hospitalizations; others may be legal-status patients who are not capable of proceeding to trial; some simply require longer-term treatment that cannot be provided on the short-term adult admissions units. Using a rehabilitation model of recovery and emphasizing skills-building modules, adult extended treatment utilizes behavioral and psychosocial approaches, psychoeducation, psychotherapy, crisis intervention, and milieu therapy. An active treatment mall is located within the service and provides rehabilitation, treatment, and enrichment through group psychotherapy, including recreational therapy, occupational therapy, discharge planning, medical education, and creative expressive therapies.

The adult extended treatment program offers interns an opportunity to do individual therapy work with selected patients as well as to train in behavioral and psychosocial milieu approaches. Interns typically carry 4-5 individual psychotherapy cases, co-facilitate two to three groups in the treatment mall, and conduct at least one complete assessment battery that includes both projective and objective assessment. As members of interdisciplinary treatment teams throughout the service, interns participate in planning and consultation, delivery, and evaluation of treatment. Interns may also be involved in clinical management issues, program development, and in working effectively with professionals in other disciplines.

Specialty Services



Specialty services is composed of two adolescent units, the deaf unit (which encompasses mental health and substance abuse services for the deaf), two geropsychiatry units, and the medical unit.

Adolescent Units

The adolescent units contain two units (one male unit and one female unit) with 28 beds for emotionally disturbed youth from 12 to 18 years of age. In addition to providing an academic curriculum through a certified school program, individual and group psychotherapy are emphasized for the adolescents. In addition, a therapeutic milieu with a comprehensively-structured and behaviorally-oriented point system intended to promote a wide range of desired behaviors is provided within these units. Whenever possible, family therapy is provided in addition to individual psychotherapy and group work. Many youth are seen for formal psychological evaluations consisting of a battery of objective and projective measures selected to address specific referral questions such as diagnostic clarification and treatment recommendations. Each newly admitted patient is interviewed by the psychology staff in order to formulate an initial clinical assessment, which is an integral part of the treatment planning process. Psychologists on the service assume a leadership role in the areas of evaluation, therapy, and programming. Interns are fully integrated into the service's psychology services, providing individual and group psychotherapy and conducting comprehensive assessment and evaluation procedures.

Deaf Unit

The deaf unit has a capacity for 14 patients and contains both a psychiatric treatment unit and an alcohol and drug treatment center for deaf patients. There is an emphasis on providing culturally sensitive and culturally relevant treatment to deaf patients on this unit, most especially those who primarily communicate through American Sign Language or could benefit from an environment where signing is the primary form of communication. Interns may participate in all aspects of treatment with the assistance of an ASL interpreter including treatment planning, psychological assessments, group therapy, and individual therapy as part of the rotation on specialty services. Interns also have the opportunity to learn about deaf culture and learn beginning sign language through free courses offered outside of work hours by the deaf services coordinator.

Geropsychiatry

The geropsychiatry units are made up of two units with approximately 20 patients on each unit (one male unit and one female unit). Interns are involved in treatment planning and psychological services for this geriatric population. Duties also include supervised neuropsychological screening and assessment, providing group, individual, or family therapy, and/or treatment team participation. In addition, the intern may have exposure and/or experience in guardianship assessments as well as work on the medical unit of the hospital for those psychiatric patients with acute or chronic medical problems that need active treatment.

SECONDARY ROTATIONS

Interns may spend up to eight hours a week on a secondary rotation. The secondary rotation may be on one of the other services within the hospital or in the Dialectical Behavior Therapy (DBT) program or the Capacity Restoration program. The DBT program provides treatment to persons with difficulty modulating affect as well as persons with a diagnosis of borderline personality disorder. The Capacity Restoration program provides services to patients who have been found incapable to proceed with trial (ITP), including group and individual capacity restoration training. Patients are assigned to one of three psychoeducational tracks based on functioning level as determined by assessments completed by psychology department staff, including interns.

SUPERVISION AND EVALUATION

Each intern has a number of supervisors at any one time. Each intern receives *at least* four hours of supervision each week, with at least two hours being individual face-to-face supervision. Interns and supervisors develop a supervision and training contract at the beginning of each rotation or placement to identify regularly scheduled supervision meetings as well as the goals and expectations of the intern during the rotation.

In addition to weekly informal feedback, supervisors provide formal written feedback at various points throughout the training year. Inpatient supervisors give written feedback at the end of each rotation. Interns are encouraged to provide the staff with feedback about their rotations in an ongoing fashion. The interns also complete formal evaluation of each supervisor and rotation or placement. This is given to the internship training director and not shared with the supervisors until the end of the training year.

CURRICULUM PLAN

Interns are expected to attend weekly seminars that are designed and presented especially for the predoctoral psychology interns. Each Wednesday afternoon, interns attend and participate in two 1¼-hour seminars addressing assessment, treatment, and professional development issues. Interns also attend group supervision meetings on Wednesdays and Fridays.

Assessment Seminars

These seminars offer training in a wide range of assessment issues, including assessment of dementia, assessing capacity to proceed, violence risk assessment, as well as the use of objective and projective measures.. Seminars and case presentations are presented by internship faculty or outside guests. Additionally, interns are expected to provide two assessment case presentations during the year. The following is a list of specific topics covered during recent internship years.

TOPICS	
Risk assessment of violence & the HCR-20	Factitious disorders
Suicide risk assessment	Assessment & treatment of sex offenders
Assessment of dementia	Assessment through art therapy
Behavioral principles	Violence risk assessment in youth (SAVRY)
Functional assessment & intervention development	Assessment of Competence
Data collection & treatment monitoring	PAI
Rorschach - Exner (multiple sessions)	Substance abuse assessment
MMPI-2	MCMI-III
MMPI-A	Faculty case presentations

Treatment and Professional Development Seminars

These seminars cover a wide variety of topics related to

advanced issues in psychotherapy and professional development, with special emphasis on topics related to multicultural diversity and ethical issues. In addition to covering a range of relevant practice topics, these seminars also provide a venue for interns and faculty to present treatment cases. Following are specific topics covered during recent internship years:

TOPICS	
Adjusting to internship	Religion, spirituality, and psychology
Issues with ADHD	Personality disorders (multiple sessions)
Brief psychodynamic psychotherapy	How to act (and not act) in court
Job search in psychology	Expert testimony
Involuntary commitment	Ethical dilemmas
Preparing for the EPPP & licensure	Boundaries & dual relationships
Interventions with suicidal behavior	Boundaries and Dual Relationships
Treatment of co-occurring disorders	Risk management for psychologists
Myths about Appalachia and an ethnographically informed approach to cultural competence	Early psychosis intervention: Clinical and ethical issues
Antidepressants & anxiolytics	End of life issues
Antipsychotics	Grief
Group therapy for trauma, substance abuse, and grief using guided imagery	Symptom Illness & Recovery Toolkit
Guardianship	Discharge planning: Wellness Recover & Action Plan (WRAP)
Competency restoration	Patient Outcomes Research Team: Findings on schizophrenia outcomes research

QUALITY ASSURANCE

In order to successfully complete the Broughton internship program, an intern must meet the following outcome standards:

1. Completion of a minimum of 1832 hours of training.
2. At least two clinical treatment case presentations to demonstrate competence in conceptualization and implementation of an appropriately individualized treatment plan, which should include a focus on relevant ethical, systems, and multicultural considerations.
3. At least two diagnostic case presentation utilizing a battery of assessment instruments, to demonstrate an ability to provide conclusions and recommendations which are consistent with the test data.
4. Intern competence in assessment and treatment is of primary importance in achieving the goals of this internship program. Competence in these areas is measured via supervisor evaluations by means of direct observation, progress note reviews, patient/ client evaluations, and conceptualizations and interventions presented in supervision and case conferences. In addition, interns must show overall good use of supervision and professional development consistent with performance expectations and standards for entry-level psychologists. The five primary domains of formal evaluation include: 1) psychological assessment, 2) psychotherapy and treatment, 3) professional skills, 4) professional behavior, and 5) supervision. For successful completion of the internship, an intern must attain a rating of Satisfactory, or 3 or above, on all applicable areas of his or her evaluation on his or her final rotation.

THE COMMUNITY AND AREA

Broughton Hospital is located in Morganton, North Carolina. The city is nestled in the foothills of the Blue Ridge Mountains, an area that ranks among the nations' most pleasing locations. The community blends the desirable features of small town living with easy access to the shopping and cultural opportunities of the nearby larger cities of Charlotte and Asheville.

In addition to Broughton Hospital, the other state-operated facilities in Morganton include the J. Iverson Riddle Center, a residential facility for persons with developmental disabilities, and the North Carolina School for the Deaf.



Broughton Hospital



Lake James



Table Rock

**PROGRAMS FROM WHICH INTERNS HAVE COME
DURING THE PAST TWENTY EIGHT YEARS**

American School of Professional Psychology (Argosy – Washington, D.C.)	5
Auburn University	1
California School of Professional Psychology at Alameda	2
California School of Professional Psychology at Fresno (Alliant University – Fresno)	3
California School of Professional Psychology at Los Angeles	1
Carlos Albizu University (formerly Miami Institute of Psychology)	1
Case Western Reserve University	1
Chicago School of Professional Psychology	1
Emory University	1
Fielding Graduate University	1
Florida Institute of Technology	8
Florida School of Professional Psychology (Argosy – Tampa)	7
George Fox University	1
Georgia School of Professional Psychology (Argosy - Atlanta)	6
Georgia State University	4
Illinois School of Professional Psychology – Chicago (Argosy)	3
Indiana State University	1
Indiana University of Pennsylvania	1
Jackson State University	4
Louisiana State University	2
University of Memphis (formerly Memphis State University)	1
Minnesota School of Professional Psychology (Argosy)	2
Nova Southeastern University	3
Ohio University	3
Pacific Graduate School of Psychology	2
Purdue University	1
Regent University	4
Spalding University	1
State University of New York at Albany	1
Texas A & M University	1
Texas Woman's University	1
The University of Toledo	1
University of Detroit-Mercy	2
University of Hartford	4
University of Hawaii – Manoa	1
University of Illinois at Chicago	1
University of Louisville	1
University of Manitoba	2
University of Mississippi	2
University of North Carolina at Chapel Hill	6
University of North Carolina at Greensboro	2
University of South Carolina	2
University of Southern Mississippi	1
University of Virginia	1
University of Windsor	1
University of Wyoming	1
Vanderbilt University	1
Virginia Consortium for Professional Psychology	4
Wright Institute	2
Yeshiva University	1

INTERNSHIP FACULTY



Internship Training Director

James M. Moore, Jr., Ph.D., Ohio University, 1988.

Chief Psychologist, Specialty Services

Areas of clinical emphasis or interest: Assessment; ethics; risk assessment.

Interests/hobbies: Blacksmithing



Barbara F. Beier, Ph.D., University of Tennessee, 1994.

Staff Psychologist, Specialty Services/Gero/Medical Service.

Areas of clinical emphasis or interest: Schizophrenia, psychiatric rehabilitation, and Dialectical Behavioral Therapy.

Interests/hobbies: Duplicate Bridge, amateur radio, walking for health, reading, kung fu, playing the accordion



Julie A. Dickison, Psy.D., Virginia Consortium for Professional Psychology, 1996. Psychology Department Director.

Areas of clinical emphasis or interest: Integrated and Allied Behavioral Health, program development, clinical research and logistics, primary care psychology, bariatric (surgery) psychology, mental health diagnosis reliability and validity

Interest/hobbies: Choral music performance, biking, cooking, mountain life



R. Bryan Frenzel II, M.A. The Wright Institute, 2009.

Staff Psychologist, Adult Extended Treatment Service

Areas of clinical emphasis or interest: Dialectical Behavior Therapy, risk assessment, ethics, cognitive-behavioral therapy, and SPMI population.

Interest/hobbies: Backpacking, mountain biking, rock climbing, cooking and golf.



Wayne S. Fullerton, Ed. D. University of California – Berkeley, 1972.

Staff Psychologist, Adult Admissions

Areas of clinical emphasis or interest: Cognitive behavioral therapy, perinatal anxiety and depression, ethical standards for psychologists, mental health education and development of best practices documents.

Interest/hobbies: Classical music and art, history, especially United States and Canada, travel and cross-cultural studies



Lori K. Hall, Psy.D. Regent University, 2012

Staff Psychologist, Adult Admissions

Areas of clinical emphasis or interest Forensic psychology, risk assessment, capacity restoration, adult acute care

Interest/hobbies: Hiking, running, crossfit, kayaking



Rosalba Pardo, Psy.D., Carlos Albizu University, 2002

Chief Psychologist, Adult Services

Areas of clinical emphasis or interest: Acute adult care, SPMI, forensic psychology, cognitive behavioral therapy

Interests/hobbies: First edition book collecting



Erin Pshenishny, Ph.D., Indiana University, 2012

Staff Psychologist, Adult Services

Areas of clinical emphasis or interest: Forensic psychology, malingering, psychotherapy, psychological assessment, and SPMI population.

Interests/hobbies: Running, hiking, kayaking, cooking, and traveling.



David F. Richards, Ph.D., University of Nevada – Reno, 2002

Senior Behavior Specialist

Areas of clinical emphasis or interest: Behavior analysis, Dialectical Behavior Therapy, cognitive-behavioral therapy, assessment.

Interests/hobbies: Music, art, golf, cooking



Karen F. Swaim, Ph.D., University of Memphis, 1998.

Senior Psychologist, Adult Admissions

Areas of clinical emphasis or interest: Forensic psychology, capacity to stand trial, feigning and malingering

Interests/hobbies: Music, cooking, health and fitness



Sheila D. Williamson, Ph.D. University of Mississippi, 1998.

Senior Psychologist, Adult Admissions

Areas of clinical emphasis/interest: Trauma, sexual offending across the life span.

Interests/hobbies: Art

ADJUNCT FACULTY

Elizabeth Guzman, JD, Law School at University of Florida, 1987. Assistant Attorney General, Broughton Hospital. Civil Commitment; Criminal Appellate work.

For information regarding the
Guidelines and Principles for Accreditation of Programs in Professional Psychology, contact:

APA Office of Program Consultation and Accreditation
750 First Street, NE • Washington, DC • 20002-4242
Phone: 202-336-5979 • TDD/TTY: 202-336-6123
Fax: 202-336-5978 • email: apaaccred@apa.org
Website: <http://www.apa.org/ed/accreditation/>

Broughton Hospital provides equal opportunity to all applicants without discrimination on the basis of race, color, religion, national origin, gender, age, or disability. Both the hospital and mental health agencies affiliated with the internship program have a drug-free workplace policy.

Information Booklet revised: August 2014
